



Prepared Statement of

Brady Van Engelen

Associate Director

Veterans for America

(202) 557-7530

[bvanengelen@vi.org](mailto:bvanengelen@vi.org)

[www.veteransforamerica.org](http://www.veteransforamerica.org)

Testimony before the

Subcommittee on Disability Assistance and Memorial Affairs of

The House Veterans Affairs Committee

Hearing on

“Impact of Operation Iraqi Freedom and Operation Enduring

Freedom on the VA Claims Process”

March 13, 2007

Brady Van Engelen is the Associate Director at Veterans for America. Van Engelen was deployed to Iraq in September of 2003. In April of 2004 Brady sustained a severe gunshot wound to the head while in combat. He was medically evacuated from theater and sent to Walter Reed Army Medical Center for further medical attention, where he was eventually discharged from the military in January of 2005.

Chairman Hall, Representative Lamborn, Members of the Subcommittee:

Thank you for the opportunity to testify.

On April 6<sup>th</sup> of 2004 I sustained a gunshot wound to the head in Baghdad, while positioned at an observation post. First aid was immediately administered, and I was fortunate to have survived long enough to make it to the 28<sup>th</sup> Combat Support Hospital (CSH). The primary repairs and closures for my head were conducted while in theater at the 28<sup>th</sup> CSH. From there, I was medically evacuated to a military hospital in Landstuhl, Germany, where I was staged for recovery until I had regained enough strength to travel back to Walter Reed Army Medical Center to complete the recovery process.

I arrived at Walter Reed Army Medical Center on April 14, 2004, where I was immediately asked if I wanted to be treated as an inpatient or outpatient. Wanting to spend time with family and loved ones, I chose to be outpatient, at which point I was given the building number of the Mologne House and told to check in there. With no clue as to where the building was, I hopped onto a facility shuttle and asked if I could get a ride to the Mologne House to check in.

The first two weeks of appointments I was fortunate enough to have my family and loved ones at my side to assist me through the bureaucratic maze that is outpatient care at Walter Reed. In one month's time, my rehabilitative care was completed, and I was told the Physical Evaluation Board (PEB) process would begin shortly thereafter.

That was May 30, 2004.

I didn't hear back about my case until December of 2004.

Other than the research that I conducted on my own time, I was completely unaware of what my possibilities were and what to do next. Throughout the entire process I was the one who always initiated contact with the case managers and the hospital. If it weren't for my persistence, I could have gone unnoticed for months. There were just too many patients, and not enough case managers to oversee the process.

The systemic problems that have highlighted Walter Reed in recent weeks have unfortunately trickled over to the Department of Veterans Affairs (VA). The VA is overwhelmed by the number of claims filed and patients needing attendance. We didn't prepare for this, and it's painfully evident. My generation is going to have to pay for this, and we will be paying for years and years.

While at Walter Reed as an outpatient there was no outreach on behalf of the VA to inform me of benefits for myself and for my family. When troops were returning from WWII, there were VA claims specialists on the boats with the service men informing them of benefits that they were eligible for, we have lost that aggressive approach with today's service members and veterans. Today, we are being asked to navigate the bureaucratic maze of DoD and VA on our own. I can assure you that this is no small

feat. Shifting the burden from our government to those who serve has created a system where service members and veterans are unaware of the benefits and programs promised to them upon enlistment.

I understand that the VA has begun to more aggressively address the **inpatients** while they are recovering at medical facilities, but, as was the case at Walter Reed, only a small number of injured soldiers are benefiting. This is not acceptable.

Many wounded service members at other medical outpatient facilities throughout the country remain as uninformed as I was upon leaving the military. Service members from my generation are becoming increasingly disenfranchised with a system that our government promised would help us heal and rehabilitate.

Claims backlogs are currently at 180 days, a few years ago claims were half that. The families of service members are suffering from this lack of preparation by our VA. They cannot call the bank, say they are waiting for a response on a claim, and ask for payments to be delayed for another 180 days. The passive nature of the VA regarding health and claims dispensation will only tarnish their perception amongst the military and their families. We may end up with an entire generation of veterans who have no faith in our VA because those running it – as well as those overseeing it – were unable to hold up their end of the bargain. This saddens me deeply.

In closing, I'd sum up the problems with the VA claims process like this:

I entered the VA system on January 29, 2005.

That was 774 days ago.

No one from the VA has contacted me yet to tell me how the system works.

I urge the members of this subcommittee to keep one question in mind as they consider how to repair this broken system:

*What is owed those who serve?*

While I do not claim to have all the answers to that question, I am confident that you will conclude that the answer is:

*More than service members and veterans are receiving now.*

Thank you.